

P18000045831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

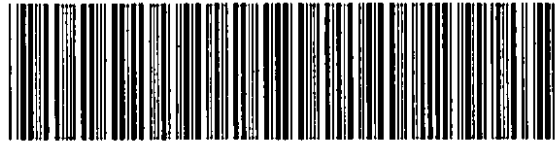
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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N. SAMS

MAY 18 2018



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04/23/18--01032--005 \*\*78.75

18 MAY 17 PM 4:52  
TALLAHASSEE, FLORIDA

## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Mima KASA, LLC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Mima KASA, LLC  
Name (Printed or typed)

1346 CLEARGLADES DRIVE  
Address

WESLEY CHAPEL, FL 33543  
City, State & Zip

813 476 8168  
Daytime Telephone number

MKGROUPO618@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2018 MAY 17 AM 10:32

RECIV

2018 MAY 17 AM

May 4, 2018

MIMA KASA, LLC  
1346 CLEAR GLADES DRIVE  
WESLEY CHAPEL, FL 33543

SUBJECT: MIMA KASA, LLC  
Ref. Number: W18000041930

FILED  
MAY 17 2018  
TALLAHASSEE, FLORIDA

18 MAY 17 PM 4:52

We have received your document for MIMA KASA, LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

You have submitted the document and fees to form a Florida corporation; however, your name implies you wish to form a limited liability company. The name of a corporation cannot contain a limited liability company suffix. Limited Liability Company, L.L.C. and LLC are all limited liability company suffixes. The name of a corporation must contain Corporation, Corp., Incorporated, Inc., Company or Co.

Please correct the suffix or, if you wish to form a limited liability company, submit "Articles of Organization" along with the additional fee(s). Any fees previously submitted with your corporate filing will be applied to your limited liability company filing.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The form submitted back to us is the incorrect document. Using that document given, it states on Sunbiz that it is inactive and filing an Amendment will not be able to be processed. I will enclose the correct document if you would like to form an LLC for your name. If you would like to form a Corporation, please change the suffix on the document and resubmit it back to us.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call

(850) 245-6052.

Nadira D McClees-Sams  
Regulatory Specialist II

Letter Number: 718A00009275

18 MAY 17 PM 4:52  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: MIMA KASA, ~~SEE~~ INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1346 CLEARGLADES DRIVE  
WESLEY CHAPEL, FL 33543

Post Office Box 47393  
Tampa, FL 33646

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: REAL ESTATE INVESTMENT,  
PROPERTY MGMT

18 MAY 17 PM 4:52  
CORPORATE RECORDS  
TAMPA, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: STEVEN AND WYCLIF CEO  
Address: Post Office Box 47393  
Tampa, FL 33646

Name and Title: KINA WYCHE CFO  
Address: Post Office Box 47393  
Tampa, FL 33646

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: KINA WYCHE  
Address: 1346 CLEARGLADES DRIVE  
WESLEY CHAPEL, FL 33543

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: STEWELAND WYCHE  
Address: 1346 CLEARGLADES DRIVE  
WESLEY CHAPEL, 33543

18 MAY 17 PM 4:52  
MOUNTAIN VIEW, FLORIDA

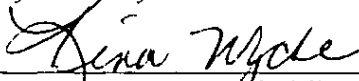
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

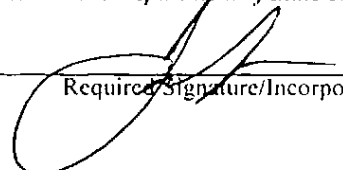
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature/Registered Agent

5 MAR 18  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
Required Signature/Incorporator

5 MAR 18  
Date